



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 8607

<b>SERIAL NUMBER</b> 10/662,001	<b>FILING OR 371(c) DATE</b> 09/12/2003 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3767	<b>ATTORNEY DOCKET NO.</b> 11102.2.1
<b>APPLICANTS</b> John B. Slate, San Diego, CA; Michael W. Burk, San Marcos, CA; Lanny A. Gorton, San Diego, CA;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/892,366 06/26/2001 PAT 6,652,483 <i>CBM</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>CBM</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 12/13/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 20
		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> 23862				
<b>TITLE</b> Sequential impulse/delivery fluid medicament injector				
<b>FILING FEE RECEIVED</b> 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	